

*City of Millersville*

TDEC  
NASHVILLE  
FIELD OFFICE  
RECEIVED

1246 Louisville Highway  
Millersville, TN 37072-3613

Phone: (615) 859-0880

Fax: (615) 851-1825

2011 JUL 22 AM 10:13



*Office of the Codes Administrator*  
Karen.smith@cityofmillersville.com

Wednesday, July 13, 2011

TDEC Environmental Field Office  
711 RS Gass Blvd.  
Nashville, TN 37243-1550

Dear EFO:

It has recently come to my attention that we may not have properly inspected and/or reported our inspections to the state for our new building project in the City of Millersville.

I regret that there was a miscommunication between the developer and the city. The city did not want to police itself and therefore asked that the developer provide the name of the individual who would do the Stormwater inspections and provide the state with the documentations. The name and contact number was provided at the pre-construction conference and the stormwater department only inspected as we do with all other stormwater sites in the city, which is at least twice a month, following rain events and when complaints are lobbied. When we found issues that needed to be addressed, we contacted the individual in our records and things were always promptly addressed. It was our understanding that the weekly inspections were being completed; I have been able to get the documentation of his inspections and it is attached.

We knew that the inspection forms, which we distribute at our pre-construction conference, are sent to the state and did not realize that it was the responsibility of the municipality to check these forms for initials during our inspections. We have always told the contractors that these must be onsite in the event that the state inspects. I was also aware that these must be sent to the state quarterly and remind our contractors of this. I was under the impression that this form was between the inspector and the state and we have not monitored this form at any site in the city until recently. I still have so much to learn. We are now faithfully checking this documentation at all sites in Millersville.

We have gone back through our records and completed forms for the past months that include inspections which: 1) we as a municipality have performed, 2) Mr. Joey White, foreman on the site has performed, as well as, 3) those that were performed by our environmental engineer. I have attached a copy of the email I received from him stating that he had been onsite and performed these inspections. A copy of Mr. White's inspections as he presented them to us is also attached.

I apologize to the state for our deficiency in this matter; it was not a deliberate oversight, but an unfortunate misunderstanding of our role. Every time I think I understand all that we are to be doing, I realize how much more I need to learn.

I hope these forms and our apologies will be accepted. I also hope this will show that we have not ignored the site and that we were and are keeping close watch of the conditions. We have scheduled inspections for each Monday, Wednesday and Friday regardless of the weather until the site is complete. These inspections will be documented on the state form and mailed to the EFO quarterly as required.

We will also continue to treat the site as all other stormwater sites and inspect after rain events and no less than twice a month.

Thank you for your time.

Sincerest Regards,



Karen Smith

Codes Administrator

City of Millersville



DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF WATER POLLUTION CONTROL  
Construction Storm Water Inspection Report

INVESTIGATION  
FIELD OFFICE  
RECEIVED  
2010 SEP 22 AM 10:13

Construction Site Information

Outfall No. \_\_\_\_\_ (or station no. or other identifier of ~~200~~ area represented)

NPDES Tracking No. TNR1 47265 Notice of Coverage (NOC) Date: 3-10-10 County: SUMNER  
Name of Project: MILLERSVILLE COMMUNITY CENTER  
Developer and/or Contractor Name: OLYMPIAN CONSTRUCTION COMPANY

Information and Instructions

- The purpose of this form is to report quarterly on weekly inspections of storm water discharge points and the condition of erosion prevention and sediment controls at the construction site. You are required to complete this form only if discharges from the construction site enter waters the division has identified as siltation-impaired. You can determine whether you are discharging to a siltation-impaired stream by looking at the Notice of Coverage (NOC) returned to you after you applied for the construction runoff permit. You may also call your local Environmental Assistance Center (EAC) at the toll-free number of 1-888-891-TDEC or check the department's latest 303 (d) list at <http://www.state.tn.us/environment/water.htm>.
- You are required to inspect outfall points (where discharges from the site enter streams or wet weather conveyances) at least weekly to ascertain whether your erosion prevention and sediment control measures are effective in preventing soil from leaving the construction site and entering nearby streams. You are also required to inspect the erosion prevention and sediment control measures being used at the site, whether these controls have been installed according to the storm water pollution prevention plan (SWPPP) and whether these controls are in working order.
- Use a separate form for each storm water discharge point (outfall) at the construction site. Write the date that inspections were performed, in the appropriate week's column; write *Yes* or *No* to indicate if the inspections were performed; and write *Yes* or *No* to indicate whether or not erosion prevention and sediment controls were installed and in working order. Put your initials to the right of the *Yes* or *No* answers. Complete the remainder of the form per the instructions.
- The inspection results shall be submitted (postmarked) by the 15th day of the month following the end of the quarter, to the Environmental Assistance Center responsible for the area of the State where the construction project is located (see list on reverse). Quarters are January - March, April - June, July - September, and October - December. Use a new form, submitting it with original signatures, for each quarter until a Notice of Termination is filed.

Month, Year	Week 1		Week 2		Week 3		Week 4		Week 5	
	Yes or No	Initials	Yes or No	Initials	Yes or No	Initials	Yes or No	Initials	Yes or No	Initials
<u>September 2010</u>	Date: <u>9/9/10</u>		Date: <u>9/23/10</u>		Date: <u>9-24-10</u>		Date:		Date:	
Inspections Performed	<u>yes</u>	<u>RDH</u>	<u>yes</u>	<u>RDH</u>	<u>YES</u>	<u>ERIC BISCHOFF</u>				
EP&S Controls in Order	<u>yes</u>	<u>RDH</u>	<u>yes</u>	<u>RDH</u>						
<del>_____, 200</del>	<del>Date:</del>	<del></del>	<del>Date:</del>	<del></del>	<del>Date:</del>	<del></del>	<del>Date:</del>	<del></del>	<del>Date:</del>	<del></del>
<del>Inspections Performed</del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>
<del>EP&amp;S Controls in Order</del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>
<del>_____, 200</del>	<del>Date:</del>	<del></del>	<del>Date:</del>	<del></del>	<del>Date:</del>	<del></del>	<del>Date:</del>	<del></del>	<del>Date:</del>	<del></del>
<del>Inspections Performed</del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>
<del>EP&amp;S Controls in Order</del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>	<del></del>

Provide the following information for the person(s) who have performed and initialed the above inspections. If more than two persons have performed these inspections, give information for the two persons who performed the most numbers of inspections.

Initials: RDH Name: Randy Harville Phone No. 615-859-0880 x110  
Initials: EB Name: ERIC BISCHOFF Phone No. 615-649-5264

ENTERED ON FORM

PER EMAILED DATES ATTACHED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated information presented. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, I certify that inspections of storm water discharge points (outfalls) and of erosion and sediment controls have been performed as recorded in the table above. I certify that erosion and sediment controls in the drainage area of the identified outfall were installed as planned and designed and in working order as recorded in the table above. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name: Randy Harville Title: Codes Enforcement Signature: [Signature]  
Company: City of Millersville Date: 9/30/10



DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF WATER POLLUTION CONTROL  
Construction Storm Water Inspection Report

Construction Site Information      Outfall No. \_\_\_\_ (or station no. or other identifier of drainage area represented)

NPDES Tracking No. TNRI 47265 Notice of Coverage (NOC) Date: 3-10-10 County: SUMNER  
Name of Project: MILLERSVILLE COMMUNITY CENTER  
Developer and/or Contractor Name: OLYMPIAN CONSTRUCTION COMPANY

Information and Instructions

- The purpose of this form is to report quarterly on weekly inspections of storm water discharge points and the condition of erosion prevention and sediment controls at the construction site. You are required to complete this form only if discharges from the construction site enter waters the division has identified as siltation-impaired. You can determine whether you are discharging to a siltation-impaired stream by looking at the Notice of Coverage (NOC) returned to you after you applied for the construction runoff permit. You may also call your local Environmental Assistance Center (EAC) at the toll-free number of 1-833-391-TDEC or check the department's latest 303 (d) list at <http://www.state.tn.us/environment/water.htm>.
- You are required to inspect outfall points (where discharges from the site enter streams or wet weather conveyances) at least weekly to ascertain whether your erosion prevention and sediment control measures are effective in preventing soil from leaving the construction site and entering nearby streams. You are also required to inspect the erosion prevention and sediment control measures being used at the site, whether these controls have been installed according to the storm water pollution prevention plan (SWPPP) and whether these controls are in working order.
- Use a separate form for each storm water discharge point (outfall) at the construction site. Write the date that inspections were performed, in the appropriate week's column; write *Yes* or *No* to indicate if the inspections were performed; and write *Yes* or *No* to indicate whether or not erosion prevention and sediment controls were installed and in working order. Put your initials to the right of the *Yes* or *No* answers. Complete the remainder of the form per the instructions.
- The inspection results shall be submitted (postmarked) by the 15th day of the month following the end of the quarter, to the Environmental Assistance Center responsible for the area of the State where the construction project is located (see list on reverse). Quarters are January - March, April - June, July - September, and October - December. Use a new form, submitting it with original signatures, for each quarter until a Notice of Termination is filed.

Month, Year	Week 1		Week 2		Week 3		Week 4		Week 5	
	Yes or No	Initials	Yes or No	Initials	Yes or No	Initials	Yes or No	Initials	Yes or No	Initials
<u>October, 2010</u>	Date: <u>10/6/10</u>		Date: <u>10/6/10</u>		Date: <u>10-21-10</u>		Date: _____		Date: <u>10/25/10</u>	
Inspections Performed	<u>yes</u>	<u>RO</u>	<u>YES</u>	<u>ERIC BISCHOFF</u>	<u>yes</u>	<u>RO</u>			<u>yes</u>	<u>RO</u>
EP&S Controls in Order	<u>yes</u>	<u>RO</u>			<u>yes</u>	<u>RO</u>			<u>yes</u>	<u>RO</u>
<u>November, 2010</u>	Date: <u>11/2/10</u>		Date: <u>11/3/10</u>		Date: <u>11/9/10</u>		Date: <u>11/12/10</u>		Date: <u>NOV. ?</u>	
Inspections Performed	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>	<u>YES</u>	<u>ERIC BISCHOFF</u>
EP&S Controls in Order	<u>No</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>	<u>No</u>	<u>RO</u>		
<u>December, 2010</u>	Date: <u>12/1/10</u>		Date: <u>12/15/10</u>		Date: <u>12/22/10</u>		Date: <u>DEC ?</u>		Date: _____	
Inspections Performed	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>	<u>YES</u>	<u>ERIC BISCHOFF</u>		
EP&S Controls in Order	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>				

Provide the following information for the person(s) who have performed and initialed the above inspections. If more than two persons have performed these inspections, give information for the two persons who performed the most numbers of inspections.

Initials: RO Name: Randy Harville Phone No. 615-859-0880 x110  
Initials: ERIC BISCHOFF Name: ERIC BISCHOFF Phone No. 615-649-5264

ENTERED ON FORM  
PER ATTACHED EMAIL

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated information presented. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, I certify that inspections of storm water discharge points (outfalls) and of erosion and sediment controls have been performed as recorded in the table above. I certify that erosion and sediment controls in the drainage area of the identified outfall were installed as planned and designed and in working order as recorded in the table above. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name: R. Harville Title: Codes Enforcement Signature: \_\_\_\_\_  
Company: City of Millersville Date: 12/22/10



DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF WATER POLLUTION CONTROL  
Construction Storm Water Inspection Report

Construction Site Information      Outfall No. \_\_\_\_\_ (or station no. or other identifier of drainage area represented)

NPDES Tracking No. TNR1 47265 Notice of Coverage (NOC) Date: 3-10-10 County: SUMNER  
Name of Project: MILLERSVILLE COMMUNITY CENTER  
Developer and/or Contractor Name: OLYMPIAN CONSTRUCTION COMPANY

Information and Instructions

1. The purpose of this form is to report quarterly on weekly inspections of storm water discharge points and the condition of erosion prevention and sediment controls at the construction site. You are required to complete this form only if discharges from the construction site enter waters the division has identified as siltation-impaired. You can determine whether you are discharging to a siltation-impaired stream by looking at the Notice of Coverage (NOC) returned to you after you applied for the construction runoff permit. You may also call your local Environmental Assistance Center (EAC) at the toll-free number of 1-833-391-TDEC or check the department's latest 303 (d) list at <http://www.state.in.us/environment/water.htm>.
2. You are required to inspect outfall points (where discharges from the site enter streams or wet weather conveyances) at least weekly to ascertain whether your erosion prevention and sediment control measures are effective in preventing soil from leaving the construction site and entering nearby streams. You are also required to inspect the erosion prevention and sediment control measures being used at the site, whether these controls have been installed according to the storm water pollution prevention plan (SWPPP) and whether these controls are in working order.
3. Use a separate form for each storm water discharge point (outfall) at the construction site. Write the date that inspections were performed, in the appropriate week's column; write Yes or No to indicate if the inspections were performed; and write Yes or No to indicate whether or not erosion prevention and sediment controls were installed and in working order. Put your initials to the right of the Yes or No answers. Complete the remainder of the form per the instructions.
4. The inspection results shall be submitted (postmarked) by the 15th day of the month following the end of the quarter, to the Environmental Assistance Center responsible for the area of the State where the construction project is located (see list on reverse). Quarters are January - March, April - June, July - September, and October - December. Use a new form, submitting it with original signatures, for each quarter until a Notice of Termination is filed.

Month, Year	Week 1		Week 2		Week 3		Week 4		Week 5	
	Yes or No	Initials	Yes or No	Initials	Yes or No	Initials	Yes or No	Initials	Yes or No	Initials
January, 2011	Date: 1/10/11		Date:		Date: 1/20/11		Date: 1-28-11		Date:	
Inspections Performed	yes	RO			yes	RO	YES	ERIC BISCHOFF		
EP&S Controls in Order	yes	RO			yes	RO				
February, 2011	Date: 2/4/11		Date: 2-14-11		Date: 2/16/11		Date:		Date:	
Inspections Performed	yes	RO	YES	ERIC BISCHOFF	yes	RO				
EP&S Controls in Order	yes	RO			yes	RO				
March, 2011	Date: 3/1/11		Date: 3/9/11		Date: 3/17/11		Date: 3/24/11		Date: 3/30/11	
Inspections Performed	yes	RO	yes	RO	yes	RO	yes	RO	yes	RO
EP&S Controls in Order	yes	RO	yes	RO	No	RO	No	RO	yes	RO

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Initials: RO Name: R. Harville Phone No. 615 859-0880 x110  
Initials: ERIC BISCHOFF Name: ERIC BISCHOFF Phone No. 615-649-5264

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Name: R. Harville Title: Codes Enforcement Signature: [Signature]  
Company: City of Millersville Date: 3/30/11



DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF WATER POLLUTION CONTROL  
Construction Storm Water Inspection Report

Construction Site Information

Outfall No. \_\_\_\_\_ (or station no. or other identifier of drainage area represented)

NPDES Tracking No. TNR1 47265 Notice of Coverage (NOC) Date: 3-10-10 County: SUMNER  
Name of Project: MILLERSVILLE COMMUNITY CENTER  
Developer and/or Contractor Name: OLYMPIAN CONSTRUCTION COMPANY

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Month, Year	Week 1		Week 2		Week 3		Week 4		Week 5	
	Yes or No	Initials	Yes or No	Initials	Yes or No	Initials	Yes or No	Initials	Yes or No	Initials
<u>April</u> , 200 <u>11</u>	Date: <u>4/11/11</u>		Date: <u>4-4-11</u>		Date: <u>4/22/11</u>		Date:		Date:	
Inspections Performed	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>ERIC BISCHOFF</u>	<u>yes</u>	<u>RO</u>				
EP&S Controls in Order	<u>yes</u>	<u>RO</u>			<u>yes</u>	<u>RO</u>				
<u>May</u> , 200 <u>11</u>	Date: <u>5/5/11</u>		Date:		Date: <u>5/19/11</u>		Date:		Date:	
Inspections Performed	<u>yes</u>	<u>RO</u>			<u>yes</u>	<u>RO</u>				
EP&S Controls in Order	<u>yes</u>	<u>RO</u>			<u>yes</u>	<u>RO</u>				
<u>June</u> , 200 <u>11</u>	Date: <u>6/3/11</u>		Date: <u>6/8/11</u>		Date: <u>6/15/11</u>		Date: <u>6/30/11</u>		Date:	
Inspections Performed	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>		
EP&S Controls in Order	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>	<u>yes</u>	<u>RO</u>		

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Initials: RO Name: Randy Harville Phone No. 615-859-0880 x110  
Initials: ERIC BISCHOFF Name: ERIC BISCHOFF Phone No. 615-649-5264

ENTERED ON FORM  
PER EMAILED DATES

ATTACHED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated information presented. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, I certify that inspections of storm water discharge points (outfalls) and of erosion and sediment controls have been performed as recorded in the table above. I certify that erosion and sediment controls in the drainage area of the identified outfall were installed as planned and designed and in working order as recorded in the table above. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name: R. Harville Title: Codes Enforcement Signature: [Signature]  
Company: City of Millersville Date: 6/30/11

**Karen Smith**

**From:** Bischoff, Eric [Eric.Bischoff@ohm-advisors.com]  
**Sent:** Monday, April 11, 2011 1:52 PM  
**To:** Karen Smith  
**Cc:** Robert Mobley; Cavallaro, Ronald; Chizek, Steve; Hoppe, Wayne  
**Subject:** Observations of erosion prevention and sediment controls at Community Center construction site

Karen,

I have periodically observed the storm water sediment controls at the Millersville Community Center construction site since the project began. I or another OHM engineer has walked the construction site, several times more than is listed below. It is OHM's opinion that the contractor has maintained a well-organized, relatively clean site. Except for a minor amount of roadway tracking, we have not observed any signs of sediment leaving the site, or evidence of sediment reaching Slaters Creek.

As I reported in my October 7, 2010 e-mail, the erosion prevention and sediment controls were properly installed and in place prior to any ground breaking activities. The silt fencing was properly trenched and reinforced and the gravel pad construction entrance was satisfactorily installed. I was at the site and made these observations on the following dates:

September 24, 2010  
October 6, 2010  
November ??, 2010  
December ??, 2010  
January 28, 2011  
February 14, 2011  
March 24, 2011  
April 4, 2011

Thank-you,

Eric R. Bischoff

**Eric Bischoff**  
Project Manager / Civil Engineer

**OHM | Architects. Engineers. Planners.**  
209 10th Avenue South #116  
Nashville, TN 37203

p. 615.649.5264  
m. 615.589.3907  
*Advancing Communities*

[www.ohm-advisors.com](http://www.ohm-advisors.com)

This message, including attachments, is confidential and may be privileged. If you are not an intended recipient, please notify the sender then delete and destroy the original message and all copies. You should not copy, forward and/or disclose this message, in whole or in part, without permission of the sender.

07/13/2011



Department of Environment and Conservation  
Division of Water Pollution Control

## Construction Storm Water Inspection Report

(This form is required only for discharges into siltation-impaired streams and into high quality waters.)

### Construction Site Information

NPDES Permit No. TNR _____	Notice of Coverage (NOC) Date _____	County <u>Sumner</u>
Name of Project <u>Millersville Comm. Center</u>		
Developer and/or Contractor Name <u>Olympian Const. Co</u>		

Outfall No. \_\_\_\_\_ (or station no. or other identifier of drainage area represented)

Month/Year	Week 1	Week 2	Week 3	Week 4	Week 5
	Yes or No / Initials	Yes or No / Initials	Yes or No / Initials	Yes or No / Initials	Yes or No / Initials
January, <u>2011</u>	Date: <u>1/5</u>	Date: <u>1/10</u>	Date: <u>1/14</u>	Date: <u>1/27</u>	Date: _____
Inspections Performed	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	Yes or No / _____
E&S Controls in Order	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	Yes or No / _____
February, <u>2011</u>	Date: <u>2/3</u>	Date: <u>2/8</u>	Date: <u>2/16</u>	Date: <u>2/25</u>	Date: _____
Inspections Performed	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	Yes or No / _____
E&S Controls in Order	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	Yes or No / _____
March, <u>2011</u>	Date: <u>3/1</u>	Date: <u>3/9</u>	Date: <u>3/17</u>	Date: <u>3/25</u>	Date: <u>3/31</u>
Inspections Performed	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>
E&S Controls in Order	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>
April, <u>2011</u>	Date: <u>4/4</u>	Date: <u>4/12</u>	Date: <u>4/18</u>	Date: <u>4/25</u>	Date: _____
Inspections Performed	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	Yes or No / _____
E&S Controls in Order	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	Yes or No / _____
May, <u>2011</u>	Date: <u>5/3</u>	Date: <u>5/13</u>	Date: <u>5/16</u>	Date: <u>5/23</u>	Date: <u>5/27</u>
Inspections Performed	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>
E&S Controls in Order	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>
June, <u>2011</u>	Date: <u>6/2</u>	Date: <u>6/10</u>	Date: <u>6/17</u>	Date: <u>6/22</u>	Date: <u>6/27</u>
Inspections Performed	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>
E&S Controls in Order	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>
July, <u>2011</u>	Date: <u>7/5</u>	Date: <u>7/12</u>	Date: <u>7/15</u>	Date: <u>7/19</u>	Date: _____
Inspections Performed	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	Yes or No / _____
E&S Controls in Order	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	<u>Yes</u> or No / <u>gw</u>	Yes or No / _____
August, _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____
Inspections Performed	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____
E&S Controls in Order	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____
September, _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____
Inspections Performed	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____
E&S Controls in Order	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____
October, _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____
Inspections Performed	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____
E&S Controls in Order	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____

November, _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____
Inspections Performed	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____
E&S Controls in Order	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____
December, _____	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____
Inspections Performed	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____
E&S Controls in Order	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____	Yes or No / _____

Provide the following information for the person(s) who have performed and initialed the above inspections. If more than two persons have performed these inspections, give information for the two persons who performed the most numbers of inspections.

Initials <u>ju</u>	Name <u>Jay White</u>	Phone No. <u>(615) 394-1336</u>
Initials _____	Name _____	Phone No. (____) _____

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated information presented. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, I certify that inspections of storm water discharge points (outfalls) and of erosion and sediment controls have been performed as recorded in the table above. I certify that erosion and sediment controls in the drainage area of the identified outfall were installed as planned and designed and in working order as recorded in the table above. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name _____	Title _____	Signature _____
Company _____	Date _____	

### Information and Instructions

1. The purpose of this form is to report inspections of storm water discharge points and the condition of erosion and sediment controls (E&S Controls) at the construction site. You are required to complete this form only if discharges from the construction site enter waters listed on the Tennessee 303(d) list for siltation or have been identified as impaired since the last 303(d) list, or enter high quality waters. You can determine whether you are discharging to a listed stream by looking at the Notice of Coverage (NOC) returned to you after you applied for the construction runoff permit. You may also call your local Environmental Assistance Center at the toll-free number of 1-888-891-TDEC.
2. You are required to inspect outfall points (where discharges from the site enter streams or wet weather conveyances) to ascertain whether your erosion control measures are effective in preventing soil from leaving the construction site and entering nearby streams. You are also required to inspect the erosion and sediment control measures being used at the site, whether these controls have been installed according to the storm water pollution prevention plan and whether these controls are in working order. These inspections are required at least once per week.
3. For each month, spaces are given for every week of the month. To record the inspections and observations for a given week, write the date on which the inspections were performed in the box labeled "Date:." In the two boxes immediately below the Date: box, circle *Yes* or *No* to indicate if the inspections of outfall points and of the erosion and sediment control measures were performed, and circle *Yes* or *No* to indicate if erosion and sediment controls were in place and in working order. Sign your initials beside the yes or no answers that you give.
4. The inspection results shall be submitted (postmarked) by the 15th day of the month following the end of the quarter, to the Environmental Assistance Center responsible for the area of the State where the construction project is located. Quarters are January - March, April - June, July - September, and October - December. Continue to use the same form, submitting it with original signatures each quarter, until the end of the year or until the Notice of Termination is filed.

### Environmental Assistance Centers (EACs) - Division of Water Pollution Control - Addresses

EAC Office	Street Address	Zip Code	EAC Office	Street Address	Zip Code
Memphis	2510 Mt. Moriah Road STE E-645	38115-1520	Cookeville	1221 South Willow Ave.	38506
Jackson	362 Carriage House Drive	38305-2222	Chattanooga	540 McCallie Avenue STE 550	37402-2013
Nashville	711 R. S. Gass Boulevard	37243	Knoxville	2700 Middlebrook Pike STE 220	37921
Columbia	2484 Park Plus Drive	38401	Johnson City	2305 Silverdale Road	37601